PHOENIX/MARICOPA COUNTY COC

COC GOVERNANCE AND STRUCTURE ACTION PLAN

MARCH 2015

OVERVIEW

FOUR HIGH-LEVEL GOALS

- Implement strategic, purpose-driven collaboration focused on achieving client-focused outcomes
- Research and implement appropriate best practices
- Increase accountability at all levels
- Improve functionality and broaden usefulness of data and HMIS

IMMEDIATE ACTION STEPS

- REBRAND COC, INCLUDING A LOGO, A COLLECTIVE MISSION, AND A VISION STATEMENT, TO ALIGN PROGRAMS, FUNDERS, AND STAKEHOLDERS. (See Collaboration, Strategy #1)
- CREATE CENTRALIZED WEBSITE TO COMMUNICATE INFORMATION THROUGHOUT THE CONTINUUM. (See Collaboration, Strategy #1)
- EDUCATE COC (COMMITTEES, PSDQ GROUP, BOARD, ETC.) ON NEEDS OF COMMUNITY AND WHAT SERVICES ARE PROVIDED BY WHOM (See Collaboration, Strategy #1)
- INVENTORY GROUPS WORKING TOWARD ENDING HOMELESSNESS MEETING IN REGION AND CREATE BROAD COMMUNITY MAP. (See Collaboration, Strategy #3)
- CONSIDER INCLUDING GROUPS FROM OUTSIDE THE COC ON THE COC COMMITTEE. (See Collaboration, Strategy #3)
- CREATE LOCAL COMMITTEE TO RESEARCH NATIONAL EBPS AND ALIGN WITH LOCAL REALITY AND WITH HUD EXPECTATIONS. (See Best Practices, Strategy #2)
- CREATE ONGOING TRAINING PROGRAM ON BASE CONCEPTS AND EBPS TO ENSURE CONSISTENT UNDERSTANDING (HOUSING FIRST; HARM REDUCTION). (See Best Practices, Strategy #3)
- DESIGNATE ONE PERSON OR GROUP TO REVIEW ALL TRAININGS AVAILABLE AND COMMUNICATE OPPORTUNITIES TO THE COC. (See Best Practices, Strategy #3)
- DEFINE COMMUNITY PRIORITIES AND TARGET POPULATIONS (NOT JUST LIMITED TO HUD PRIORITIES) BEFORE STANDARDS ARE CREATED. (See Accountability, Strategy #1)
- **DEFINE ROLES AND RESPONSIBILITIES OF EACH COC ENTITY**. (See Accountability, Strategy #2)
- ASSESS, DOCUMENT, AND COMMUNICATE THE HMIS LEAD'S CAPACITY AND PERFORMANCE EXPECTATIONS. (See Data/HMIS, Strategy #1)

GOAL: IMPLEMENT STRATEGIC, PURPOSE-DRIVEN COLLABORATION FOCUSED ON ACHIEVING CLIENT-FOCUSED OUTCOMES

STRATEGY #1: ALIGN SYSTEM GOALS/ RESOURCES AND IMPROVE EDUCATION ACROSS SYSTEM

KEY ACTION STEPS

- **Immediate**: Rebrand CoC, including a logo, a collective mission, and a vision statement, to align programs, funders, and stakeholders.
- Immediate: Create centralized website to communicate information throughout the Continuum.
- **Immediate**: Educate CoC (committees, PSDQ Group, Board) on needs of community and what services are provided by whom.
- Increase marketing/ awareness of coordinated assessment.
- Ensure that providers have access to trainings being provided through other means (e.g. Mental Health trainings, DV trainings, Statewide coalition trainings).
- Educate providers on EBPs in the community and on what EBPs are coming down from national level.

STRATEGY #2: ENGAGE FUNDERS TO INCREASE FUNDING AND ENCOURAGE NEW VISION

KEY ACTION STEPS

- Broaden funders collaborative.
- Outreach to business community and cities and emphasize regional impact and investment.
- Bring funders together to ensure they know what EBPs are supported by the CoC; encourage them to follow suit.
 Reach out to local Housing Authorities regarding prioritizing vouchers. Share data from gaps analysis to demonstrate need for resources.

STRATEGY #3: COLLABORATE WITH NETWORKS AND PROGRAMS WITHIN AND OUTSIDE OF THE COC

- **Immediate**: Inventory all groups working toward ending homelessness meeting in region and create broad community map.
- Conduct a gaps analysis: Define how each identified partner fits in CoC's overall vision and identify specific outcome(s) for each proposed collaborative relationship.
- Immediate: Consider having the CoC Committee include other groups outside the CoC (e.g. include a
 representative from each Stakeholder group). Consider: Domestic Violence, Youth (Foster Care/CPS, Schools),
 Workforce Development, Community Action Programs, Hospitals/Clinics, Faith Communities, Criminal Justice,
 State Health, Tribal Partners, Refugee organizations, Disability groups, Crisis (Police, Fire, Detox, ERs), Veterans
 Affairs, Red Cross.
- Recruit subject matter experts (from government think tanks, research groups, academic institutions like ASU's Center for Applied Behavioral Health Policy) into CoC work groups/committees.
- Work with ASU to create permanent internship program at CoC.

GOAL: RESEARCH AND IMPLEMENT APPROPRIATE BEST PRACTICES

STRATEGY #1: DETERMINE COC WEAKNESSES TO DECIDE WHERE BEST PRACTICES ARE NEEDED

KEY ACTION STEPS

- Utilize the needs assessment being done through CES to determine local needs for best practices.
- Complete CoC inventory and/or use TA resources to complete inventory.

STRATEGY #2: IDENTIFY BEST PRACTICES TO IMPLEMENT IN COC

KEY ACTION STEPS

- Immediate: Create local committee to research national EBPs and best practices and align with local reality and with HUD expectations. (Long-term: Add a CoC staff person to monitor national best practices and bring information to CoC, taking responsibility for CoC-wide training plans.)
- Evaluate current homeless service system to measure effectiveness of current programs, taking into account special populations, to identify local best practices.
- Determine what EBPs are being used successfully in current CoC programs.

STRATEGY #3: IMPLEMENT BEST PRACTICES

- Create standards for programs requiring implementation of best practices. Tie best practices to Standards of Excellence.
- Focus on positive incentives. Programs with good outcomes can be models/peer mentors/TA providers for other projects.
- **Immediate**: Create ongoing training program on base concepts and EBPs to ensure consistent understanding (Housing First; Harm reduction).
- **Immediate**: Designate one person or group to review all trainings available and communicate that to the CoC (via centralized website or listserv).
 - o Focus on train the trainer models, CoC-wide trainings, online trainings and Webinars
 - Copy HSC model: collaborative trainings and calendar of trainings
 - Review local opportunities for capacity building: state interagency group, VSUW, CoC, etc.
 - Ensure that ideas learned at national convenings are brought back to whole CoC
 - Research scalability to determine how to support transition of all sized programs to EBPs.

GOAL: INCREASE ACCOUNTABILITY AT ALL LEVELS

STRATEGY #1: IMPROVE AND INCREASE INTERACTION WITHIN CONTINUUM

KEY ACTION STEPS

- Immediate: Clearly define community priorities and target populations (not just limited to HUD priorities) before standards are created.
- Solicit input from providers/programs in creating standards.
- Create and communicate broader comprehensive understanding of what is meant by various terms (e.g. recidivism, unemployed).
- Create specialized standards and metrics for each intervention/program/agency, soliciting input from agencies, and focusing on the needs of the clients served by each program.

STRATEGY #2: INCREASE TRANSPARENCY AND IMPROVE COMMUNICATION ACROSS AND BETWEEN ALL LEVELS OF COC STRUCTURE

KEY ACTION STEPS

- Immediate: Clearly define the roles and responsibilities of each entity within the CoC.
- Define consequences for individuals/programs that do not show up/participate a meaningful way in CoC work.
- Create and define requirement for Board to communicate with the CoC (including: what, how often, how).
- Inform programs of how they will be measured in a timely fashion.
- Provide feedback to programs in time for discussions about, and implementation of, necessary changes in advance of funding decisions.
- Create a clear community dashboard to increase transparency for programs.

STRATEGY #3: ENGAGE AND IMPROVE POOR PERFORMERS

- Create guidelines on minimum requirements to be a CoC-funded program.
- Engage historically poor performers in CoC process.
- Create a Performance Improvement Plan to be used for identified poor performers. Utilize a progressive process that ensures if the project is near the point of defunding, no one should be surprised by the decision.
 - Examine more than just current data: historical data and other items that may be relevant to measuring success or failure of that particular program.
 - TA/Training: Has program previously been given opportunity? If not, provide support or training. Programs
 must be responsible for proactively seeking improvement, but should also receive support.
 - Consider all implications of de-funding or reallocation before moving forward.
 - For providers serving non-priority communities give opportunity to shift focus before potentially reallocating resources to a provider that is willing/able to serve priority communities.

GOAL: IMPROVE FUNCTIONALITY AND BROADEN USEFULNESS OF DATA/HMIS

STRATEGY #1: IMPROVE COMMUNICATION AMONG ALL STAKEHOLDERS (CI&R, PROVIDERS, FUNDERS, BOWMAN) REGARDING DATA AND HMIS

KEY ACTION STEPS

- Immediate: Assess, document, and communicate the HMIS lead's capacity and performance expectations.
- Institute staff capacity building and training initiative to ensure all CoC stakeholders understand role and function of HMIS in managing CoC goal.

STRATEGY #2: DECREASE RELIANCE ON EXTERNAL ANALYSIS SUPPORT TO EXTRACT DATA AND RUN REPORTS

KEY ACTION STEPS

- Reverse trend of "closed" data sharing environment.
- Improve HMIS report generation.
- Obtain additional professional/senior analyst support at the CoC level to help define reports, run reports, analyze data, use data to inform community planning conversations.

STRATEGY #3: INCREASE EFFICIENCY OF HMIS

KEY ACTION STEPS

- Improve usability of ServicePoint, including ability to integrate data into HMIS from other systems.
- Determine what functions HMIS can play in supporting the CoC's Coordinated Entry System design (intake, assessment, client-to-housing matching, managing referral process, managing prioritization order, tracking status of housing placements, etc.)
- Assess the current Maricopa HMIS database structure. Is the current structure (relationship of programs to agencies by subpopulation and project type) sufficient/appropriate for the type of reports the CoC needs to generate?
- Assess need for new technology (e.g. smart phones, mobile apps, wifi for outreach teams)

STRATEGY #4: DEFINE THE ROLE OF THE PSDQ COMMITTEE

- Clearly define management, oversight, governance role in relation to CoC Board and Cl&R.
- Secure professional support staff to share workload and planning requirements for PSDQ.
- Define key metrics for CoC oversight, program management, HEARTH monitoring. Build them into HMIS for easy 'dashboard' report generation.
- Assess the structural and management needs for the broader CoC (beyond MAG's role). Duties assigned to PSDQ
 may require staffing support beyond what a volunteer committee can successfully handle.